

## PART B - FEE(S) TRANSMITTAL

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023720 7590 08/18/2005

WILLIAMS, MORGAN & AMERSON, P.C.  
 10333 RICHMOND, SUITE 1100  
 HOUSTON, TX 77042

10/11/2005 EFLORES1 00000163 010365 10021676

01 FC:1501 1400.00 DA  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mary Paul	(Depositor's name)
<i>Mary Paul</i>	(Signature)
October 4, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/021,676	12/12/2001	Matthew S. Ryskoski	2000.083300/TT4500	4732

TITLE OF INVENTION: METHOD AND APPARATUS FOR SCHEDULING PRODUCTION LOTS BASED ON LOT AND TOOL HEALTH METRICS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	11/18/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
PALADINI, ALBERT WILLIAM	2125	700-100000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Williams, Morgan &  
 2. Amerson, P.C.  
 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Advanced Micro Devices, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Austin, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 1

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- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-0365/TT4500 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *J. Mike Amerson*  
 Typed or printed name J. Mike Amerson

Date October 4, 2005  
 Registration No. 35,426

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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October 4, 2005

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**CERTIFICATE OF MAILING  
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October 4, 2005

Date

*Mary Paul*  
Signature

RE: *U.S. Patent Application Serial No. 10/021,676*  
*Entitled: "METHOD AND APPARATUS FOR SCHEDULING PRODUCTION*  
*LOTS BASED ON LOT AND TOOL HEALTH METRICS"*  
*Inventor(s): Matthew S. Ryskoski*  
*Client Reference: TT4500*

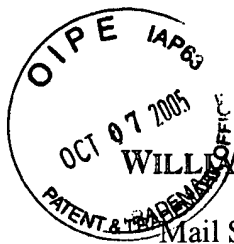
Sir:

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2. A return postcard to acknowledge receipt of these materials. Please date stamp and mail this postcard.

**The Director is authorized to deduct the issue fee, and any other fees required under 37 C.F.R. §§ 1.16 to 1.21, from the Advanced Micro Devices, Inc. Deposit Account No. 01-0365/TT4500.**

<sup>1</sup> In the event the monies in that account are insufficient, the Director is authorized to withdraw funds from Williams, Morgan & Amerson, P.C. Deposit Account No. 50-0786/2000.083300.



WILLIAMS, MORGAN & AMERSON, P.C.

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October 4, 2005

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Please date stamp and return the enclosed postcard to evidence receipt of these materials.

Respectfully submitted,

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Enclosures